

EMPIRE RESORTS INC
Form 4
May 11, 2016

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
Polle Gregg

(Last) (First) (Middle)

C/O MONTICELLO CASINO AND RACEWAY, 204 STATE ROUTE 17B, P.O. BOX 5013

(Street)

MONTICELLO, NY 12701

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
EMPIRE RESORTS INC [NYNY]

3. Date of Earliest Transaction (Month/Day/Year)
05/10/2016

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer
(Check all applicable)

Director 10% Owner
 Officer (give title below) Other (specify below)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
				Code	V Amount (A) or (D) Price			
Common Stock, \$.01 par value per share	05/10/2016		M	2,000 (1)	A \$ 9.9	62,832	D	
Common Stock, \$.01 par value per share	05/10/2016		D	1,088	D \$ 18.2	61,744	D	
Common Stock, \$.01 par value	05/10/2016		M	2,000 (2)	A \$ 7.95	63,744	D	

per share

Common
Stock, \$.01
par value
per share

05/10/2016

D

874

D

\$
18.2 62,870

D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
(e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Amount or Number of Shares
Stock Option (right to buy)	\$ 9.9	05/10/2016		M	2,000	⁽³⁾ 12/13/2016	Common stock, \$.01 par value per share	2,000
Stock Option (right to buy)	\$ 7.95	05/10/2016		M	2,000	⁽⁴⁾ 11/06/2017	Common stock, \$.01 par value per share	2,000

Reporting Owners

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

Polle Gregg
C/O MONTICELLO CASINO AND RACEWAY
204 STATE ROUTE 17B, P.O. BOX 5013
MONTICELLO, NY 12701

X

Signatures

/s/ Gregg Polle

05/11/2016

**Signature of
Reporting Person

Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
 - ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. *See* 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) The exercise of the option was net settled with the Company and 1,088 shares were withheld to pay the applicable exercise price pursuant to Section 16b-3(e) under the Securities Exchange Act of 1934.
 - (2) The exercise of the option was net settled with the Company and 874 shares were withheld to pay the applicable exercise price pursuant to Section 16b-3(e) under the Securities Exchange Act of 1934.
 - (3) The option was fully vested and exercisable as of September 14, 2012.
 - (4) The option was fully vested and exercisable as of August 7, 2013.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.